

Department of Human Services
Work Support Strategies Advisory Group Meeting
Meeting Minutes

July 29, 2013

Next meeting: September 9, 2013 9:00 – 11:00 AM

I. Announcements

- Thank you for your participation and attendance at the first meeting of the Advisory Group in the second grant year.

II. Discussion

- Current situation:
 - Revenue has dropped, needs increase and ability to provide services diminished.
 - DHS needs to be able to meet people where they are.
 - The WSS programs are entitlement programs – today people need to access what they are entitled to and not have to see many different workers.
 - Planning year grant was \$250,000, and gave DHS the opportunity to travel and look at different best practices
 - 6 of the 9 states moved to implementation with the goal of integrating silos in ways that are meaningful.
 - February 2012 when the grant was awarded, DHS was not involved in ACA the way DHS is today.
- 4 areas of focus: RI Works, Child Care, SNAP, and non-complex Medicaid
- Major areas of work in the WSS project:
 - Communication – DHS is developing processes to advise clients as to what they are eligible for.
 - Business Process Redesign – DHS has to change how we do business. RI has a national expert helping us now.
 - Policy and procedure – streamlining: RI has many policies not required federally. We will be looking at where we can better meet the needs of the client.
 - An example of this is the work schedule in CCAP.
 - Data – DHS needs to look at our data, but we don't have time to look at it.
 - Discussed the client tracking system.
 - Discussed churning reports for child care.
 - Member raised the importance of the distinction between what data we can get now and what we can get later.
 - Discussed status of the data dashboard.
 - Technology – In 2013, we need a dynamic system, but it is difficult to do this with InRhodes.
 - Staff engagement – We need the buy-in of the staff to do this work.
- Health Benefits Exchange (HBE)
 - Discussed relationship of the contact center to DHS. We are trying to make this a seamless transition.
 - 45,000 single childless adults will be enrolling in Medicaid. How can we enroll them seamlessly?
 - Member raised the point that the homeless population is very excited about the possibility of Strategy 3.
 - Deb Buffi discussed Strategy 3.

- Member raised the point that it may be valuable to put a check box on the SNAP application to put through for MAGI Medicaid.
- SNAP Recertification Unit
 - Maria Volpe discussed the SNAP Recertification Unit. DHS looked at Idaho, who had a statewide recertification unit and did a good job at reducing churn. Liked what we saw. Started with June recertifications. Do not have exact statistics yet, but we are collecting data.
- Member asked how big of an engineering effort are we talking about. How drastic is it?
 - Director: We are talking to the unions this week. Denise and Maria have talked to the staff.
 - We have no choice but to change. Penalties are an example of how the system doesn't work. Penalties have to be paid at the state level, not with federal money.
 - Member advised that we to be sure the changes are connected to UHIP.
 - Member asked if CIA be talking to the advocates? Once they complete all office assessments and client interviews, there will be a session with stakeholders.
- Additional Issues, comments, or concerns
 - Members seek resolution to the long standing conversation about getting CAP agencies/state partners access to the information in InRhode.
 - Member asked if DHS can share documents and have partner records be attached.
 - Takeaway: This is the role of the electronic document management system. DHS will bring in someone from Deloitte for the next meeting.
 - The next WSS Advisory Group and SNAP Advisory meeting conflicts. Work with Cathy to find a new time.
 - Member asked how they can access data.
 - Takeaway: DHS will make it a priority to send out data prior to each Advisory Group meeting.

III. Next Steps

- The next meeting will be held on September 9, 2013 from 9:00 – 11:00 AM